

Registration Procedure for O'Neill  
C.V.I.

Name:

It is our school policy that any student wishing to register at O'Neill C.V.I. complete a *Pre-admission Application Package*. This package must be completed and returned with all of the required documentation. Failure to bring the required documentation will mean you will not be able to register at the school.

Out of area students must complete the package and return the package with the documentation to O'Neill. Your application must be reviewed and approved by a school administrator. You will then be contacted by telephone for an appointment time.

Out of Area:  yes  
Signed Out of Area Form:  yes

A parent/guardian MUST be present with the student during the appointment.

Required Documentation:

Documents	Counsellor's Notes
<input type="checkbox"/> completion of the attached pre-admission package	
<input type="checkbox"/> original proof of address ( <i>recent bill or rent agreement or proof of purchase, a drivers license is NOT ACCEPTABLE</i> )	
<input type="checkbox"/> original court documentation if custody is not joint	

**COPY OF THE FOLLOWING DOCUMENTS**

<input type="checkbox"/> official transcript or student status sheet	
<input type="checkbox"/> most recent report card	
<input type="checkbox"/> birth certificate/landed immigrant documentation	
<input type="checkbox"/> immunization records (if not a DDSB student)	
<input type="checkbox"/> attendance record from previous school	
<input type="checkbox"/> current timetable	
<input type="checkbox"/> proof of passing the Ontario Secondary School Literacy Test	literacy co-ordinator e-mailed <input type="checkbox"/>
<input type="checkbox"/> record of community involvement hours	
<input type="checkbox"/> identified students must bring a copy of their IEP special education intake form required <input type="checkbox"/> yes <input type="checkbox"/> no	AR head e-mailed <input type="checkbox"/>
<input type="checkbox"/> Aboriginal Education Self Identification Form Offered	
<input type="checkbox"/> OFFSA eligibility	
<input type="checkbox"/> Honour Student at Previous School	Martha e-mailed with # of times Honour Students <input type="checkbox"/>
<input type="checkbox"/> O'Neill Computer Access	
<input type="checkbox"/> Registration today due to a teacher contacting student <input type="checkbox"/> yes <input type="checkbox"/> no	e-mail Tony with name <input type="checkbox"/>

Thank-you for your interest in O'Neill C.V.I.  
Sincerely  
K. Cho, Principal

**APPLICATION FOR REGISTRATION TO O'NEILL C.V.I.**

Authorization of the collection of this information is found in Part 2 of the Education Act. This information is required for administrative purposes. For additional Information concerning this collection. Please contact the Principal of the school.

**PLEASE COMPLETE ALL SECTIONS AND PRINT CLEARLY**

**NAME:** \_\_\_\_\_ **HOME PHONE:** \_\_\_\_\_

**PART I: School History - please complete all questions**

1.	Name/Phone # of School last attend:	
2.	Last year/month you attended school:	
3.	Reason for leaving previous school:	
4.	Are you currently an expelled students?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Are you currently under suspension and being recommended for expulsion?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Have you ever been expelled by a School Board?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**PART II: Address Information - proof of residency is required**

7.	Who do you live with?    Parents    Guardian    Other    Mother    Father    Self
8.	Indicate the name(s) of the person(s) circled above:
9.	Do you have any involvement with an agency. eg Children’s Aid, Group Home Facility: Please indicate:
10.	Are there any parental access issues we should be made aware of? Please explain:

**FOR OFFICE USE ONLY**

**PRINCIPAL AND VICE PRINCIPAL’S COMMENTS**

Comments: \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Notified of Decision: \_\_\_\_\_

**Previous School Administrator's Report**  
(To be completed by Principal or Vice Principal)

Name of School:

Phone Number:

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Student's name:

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Please comment on the following for the student named above:

<b>Attendance</b>	
<b>Behaviour</b>	
<b>Achievement</b>	
<b>Additional Information</b> (i.e. parental involvement, school community involvement etc.)	

Completed by (print name): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_